

AGREEMENT FORM FOR NON-CANDIDATE/ISSUE ADVERTISEMENTSSTATION and Location WHDH TV County of _____ Date: 09/13/12I, Kurt Snow, on behalf of MA Alliance Against Assisted Suicidedo hereby request station time concerning the following issue No on Question 2

Length of Broadcast	Time of Day, Rotation or Package	Days	Class of Time	Time Per Week	No. of Weeks	Rate
:30						

Date of First Broadcast <u>10/22/2012</u>	Date of Last Broadcast <u>11/5/2012</u>
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Total Charges: \$60,700The broadcast time will be used by: MA Alliance Against Assisted SuicideDoes the programming (in whole or in part) communicate "a message relating to any political matter of national importance?" Yes ☐ No ☐For programming that "communicates a message relating to any political matter of national importance," list the name of the legally qualified candidate(s) the programming refers to, the office being sought and the date(s) of the election(s) (if applicable): 11/6/2012For programming that "communicates a message relating to any political matter of national importance," see the attached Agreed Upon Schedule. I represent that the advanced payment for the above described broadcast time has been furnished by: MA Alliance Against Assisted SuicideYou are authorized to announce the broadcast as paid for by such person or entity. The entity furnishing the payment, if other than an individual person, is a: Ballot Measure CommitteeThe names, offices, and addresses of the chief executive officers, directors, and/or authorized agents of the entity are: Treasurer: Thomas Harvey Client Address: P.O. Box 550121, Waltham, MA, 02455

This station does not discriminate or permit discrimination on the basis of race or ethnicity in the placement of advertising. I agree to indemnify and hold harmless the station for any damages or liability, including reasonable attorney's fees, that may ensue from the broadcast of the above-requested advertisement(s). For the above-stated broadcast(s), I also agree to prepare a script, transcript, or tape, which will be delivered to the station at least _____ before the time of the scheduled broadcasts.

TO BE SIGNED BY ISSUE ADVERTISERDate: 9/13/2012
(Candidate, or Agent)Contact phone number: 916-473-8866**TO BE SIGNED BY STATION REPRESENTATIVE**☐ Accepted☐ Accepted in Part☐ Rejected_____
Signature_____
Printed Name_____
Title